

SEP - 1 2005

510(k) Summary

Prepared May 24, 2005

<b>TRADE NAME</b>	AVANA Dental Implant System
<b>GENERIC NAME</b>	Endosseous Implant
<b>CLASSIFICATION</b>	Class II (21 CFR 872.3640)
<b>SUBMITTED BY</b>	EK SCIENCE REASEARCH INTL. CO. 9494 Silver Fern Pl. Rancho Cucamonga, CA 91730 tel. (909) 980-9933 fax. (909) 980-9951 email – ekscience@usa.com  for  Osstem Co., Ltd. #38-44, Guje 3-Dong Busan Republic of Korea 612-073
<b>CONTACT</b>	Mr. Ki Won Kim
<b>PREDICATE DEVICE</b>	Lifecore Stage –1 Single Stage RBM Dental Implant System, K-003226 Osstem Co. 3A Dental Implant System, K011879 Swissplus Dental Implant, K-002188
<b>DEVICE DESCRIPTION</b>	The Avana SS-II Implant is a threaded, root form endosseous implant comprised of an internal octa, one-stage 8° morse tapered device manufactured from commercially pure titanium. The implant's external threaded surfaces are roughened to facilitate tissue and bone integration. The implant's self-tapping feature may be used with or without pre-tapping the bone. System components for restorative purposes include: screw-on and cemented abutments, healing abutments, and angled abutments. Surgical accessories include drills, depth gages, drivers, torque wrenches, taps, reamers and fixture mount removal tool.

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**INDICATIONS  
FOR USE**

AVANA Dental Implant Systems are designed for use in dental implant surgery. A successfully osseointegrated implant will achieve a firm and direct connection between the living bone and the surface of the titanium fixture when surgically implanted under controlled conditions, as per well known clinical studies. They are intended for use in partially or fully edentulous mandibles and maxillae, in support of single or multiple-unit restorations including; cement retained, screw retained, or overdenture restorations, and terminal or intermediate abutment support for fixed bridgework.

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**TESTING**

Biocompatibility of the AVANA Dental Implant System was verified in accordance with ISO 10993-1, Biological Evaluation of Medical Devices. Animal studies were conducted to determine the performance of the surface treatment.

In-vitro performance tests were conducted to establish device durability as well as to characterize the implant surface treatment and purity. These studies included compression and fatigue tests as well as spectroscopic studies.

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**SUMMARY OF  
SUBSTANTIAL  
EQUIVALENCE**

The AVANA Dental Implant System is substantially equivalent to the predicate devices in its construction, intended use and principles of operation.

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Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Osstem Company Limited  
C/O Albert Rego, Ph.D.  
27001 La Paz, Suite 312  
Mission Viejo, California 92691

Re: K051576

Trade/Device Name: AVANA Dental Implant System  
Regulation Number: 21 CFR 872.3640  
Regulation Name: Endosseous Dental Implant  
Regulatory Class: II  
Product Code: DZE  
Dated: June 10, 2005  
Received: June 14, 2005

Dear Dr. Rego:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

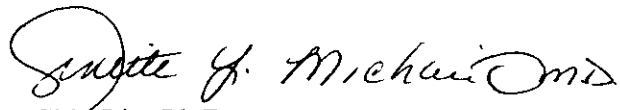
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Chiu Lin, Ph.D.", written in a cursive style.

Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital,

Infection Control and Dental Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

OSSTEM CO., LTD.

TRADITIONAL 510(K): AVANA DENTAL IMPLANT SYSTEM

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Indications for Use Statement

510(k) Number (if known): K051576

Device Name:

AVANA Dental Implant System

Indications for Use:

AVANA Dental Implant Systems are designed for use in dental implant surgery. A successfully osseointegrated implant will achieve a firm and direct connection between the living bone and the surface of the titanium fixture when surgically implanted under controlled conditions, as per well known clinical studies. They are intended for use in partially or fully edentulous mandibles and maxillae, in support of single or multiple-unit restorations including; cement retained, screw retained, or overdenture restorations, and terminal or intermediate abutment support for fixed bridgework.

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use ☒  
(Per 21 CFR 801.109)

or  
Susan Rimmer  
(Division Sign-Off)  
Division of Anesthesiology, General Hospital,  
Infection Control, Dental Devices

Over the Counter Use ☐

510(k) Number: K051576